

Foster Family Home - Deficiency Report

Provider ID: 1-591372

Home Name: Marylo Farinas, CNA

Review ID: 1-591372-11

91-1057 Aeae Street

Reviewer: Jackie Chamberlain

Ewa Beach

HI

96706

Begin Date: 10/13/2021

Foster Family Home

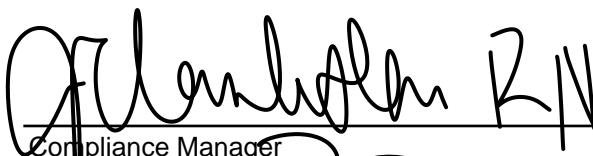

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) CCFFH inspection made for a 3 bed annual inspection. CCFFH met all compliance requirements at the time of the CCFFH inspection. No corrective action required.


Compliance Manager

Primary Care Giver

10/14/21
Date
10/14/21
Date